	DEPARTMENT OF STATE EXECUTIVE SECRETAR ACTION SLIP	TAT TA	Pour	DATE:	2 4
	(-lncl	OWOT		S/S CONTRO	
	(Classification/Downgra	ider)	S. JAIL	853	1066
ACTION ASSIGN	ED TO: PA/CM.	D (E789F	DUE IN S/S BY:	0 25
ACTION REQUES	STED CA	NY DENY	E () DECL	PART I	s Or) i Mong
STATE T	OMEMO RANSMITTAL FORMOVP	PA Exem	otionally	reply for signa () clas ment or Reconnection	aantag jiji
DIRECT F FOR SIGN	NATURE BY H- 70	Planh	provide in of State	transmittal	cover form
REPLY FO	OR SIGNATURE		provide co	omeback copy	
wit	ENDATION FOR Nemorandum for the President HANDLING		with reply		N ACTION MEMO
	CTION SLIP AND ORIGI	VAL CORRES	PONDENCE	TO ANY SUBM	IISSION TO S/S
action	che to para	6/ 0070 2- 3- 5- 6- 6- 6- 6- 6- 6- 6- 7- 8- 8- 8- 8- 8- 8- 8- 8- 8- 8- 8- 8- 8-	Fore -	IS NECESS	AL NED ORIG. SARY, PREPARE TCH CABLE.
COPIES TO:					
S	A M/COMP B M/CTP C M/DGP	CIP CA CABLA MAN NO DES PAPEN	RP AF ARA EAP EUR NEA UNA ACL	- -	8
IA S/S-C	M/EEO M/WHL	FROM:	Dri	Rend	u

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